2007 Plan Design

HMO _{1.}			PPO			QHDHP		
Enrollment	21,623		Enrollment	13,596		Enrollment	182	
	Single	Family		Single	Family		Single	Family
Deductible	\$0	\$0	Deductible	\$0	\$0	Deductible	\$1,500	\$3,000
Coinsurance	10%	10%	Coinsurance	35%	35%	Coinsurance	20%	20%
Coinsurance Max	\$1,000	\$2,000	Coinsurance Max	\$2,200	\$4,400	Coinsurance Max	\$3,500	\$7,000
Total Deductible & Coinsurance	\$1,000	\$2,000	Total Deductible & Coinsurance	\$2,200	\$4,400	2. Out-of- Pocket Max	\$5,000	\$10,000
Office	Adult	Child	Office	Adult	Child	Office	Adult	Child
Copay			Copay			Copay		
PCP	\$20	\$20	PCP	35%		PCP	n/a	n/a
				Coinsurance				
Specialist	\$30	\$30	Specialist	35%		Specialist	n/a	n/a
				Coinsurance				
Preventive care	Paid in full		Preventive Care	First \$450 @ 100% then Ded/Coins		Preventive Care	First \$450 @ 100% then Ded/Coins	
ER Visit	\$75 Copay/Ded/Coins		ER Visit	\$75 Copay/Coins		ER Visit	Ded/Coins	
Drug OOP	\$2,580 per		Drug OOP	\$2,580 per		Drugs Included in the		
Max	person		Max	person				al out-of-
	(excludes non			(excludes non			ро	cket
	preferred drugs)			preferred drugs)				

- 1. HMO Services must be provided by or with a referral from the PCP to be covered.
- 2. QHDHP Office visits and prescription drugs subject to deductible, coinsurance/copays up to the plan out-of-pocket maximum.
- 3. Inpatient hospital copay applied in 2007 HMO=\$200 PPO=\$300network /\$600 non network
- 4. HMO had a copay for outpatient surgery & major diagnostic tests of \$100. PPO services subject to coinsurance.